

## PART B - FEE(S) TRANSMITTAL

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32127 7590 06/18/2007

**VERIZON  
PATENT MANAGEMENT GROUP  
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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above; or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

**Angela N. Trafton**

(Depositor's name)

**/ Angela N. Trafton /**

(Signature)

**9/18/2007**

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/759,100	01/12/2001	W. David Shambroom	96-3-512CON/CIP2	1842

TITLE OF INVENTION: PLATFORM-NEUTRAL SYSTEM AND METHOD FOR PROVIDING SECURE REMOTE OPERATIONS OVER AN INSECURE COMPUTER NETWORK

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
Nonprovisional	NO	\$1400	\$300	\$0	\$1700	09/18/2007
EXAMINER	ART UNIT	CLASS-SUBCLASS				
ABRISHAMKAR, KAVEH	.2131	713-168000				

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.63).

- Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47, Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

**Verizon Laboratories, Inc.**

Walham, MA

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are submitted:

- Issue Fee  
 Publication Fee (No small entity discount permitted)  
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 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 07-2347 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature **/ Michael A. Wrenn /**

Date **9/18/2007**

Typed or printed name **Michael A. Wrenn**

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